

**1994 INVENTORY OF FEDERAL HAZARDOUS
WASTE ACTIVITIES AT FORMERLY OWNED
OR OPERATED FEDERAL FACILITIES (FOFFS)**

Facility name: PEDRO DOME RADIO RELAY SITE

Department : DEFENSE

Agency : AIR FORCE

ORIGINAL

FORMERLY OWNED OR OPERATED FEDERAL FACILITIES

Note: The phrase 'formerly owned or operated Federal facility' or 'FOFF' is used throughout this questionnaire to indicate all the contiguous property at any one location which was formerly owned or operated by a Federal agency and at which hazardous waste was disposed of during the time of government ownership or operation. The boundary of the FOFF is the perimeter of the contiguous property formerly owned or operated by a Federal agency irrespective of the boundary of any CERCLA sites or RCRA facilities that may have been or are presently located on the property. Fill out the survey if the facility was involved in hazardous waste disposal before or during the time of government ownership or during government operation.

Complete a separate form for each FOFF.

A. FOFF GENERAL INFORMATION

1. FOFF Name : PEDRO DOME RADIO RELAY SITE
Department: DEFENSE
Agency : AIR FORCE
Owned: ☒ Operated: ☒ Foreclosure or Forfeiture: ☐

2. What is the name, title and telephone number of the person who completed this survey?

Name MOHINDER SAINI
Title PROGRAM MANAGER
Telephone (202) 272-1594

3. If this is a formerly operated facility, provide the name of the facility owner at the time of operation.

USAF

4a. FOFF location address

Address (NO STREET ADDRESS AVAILABLE)
City FAIRBANKS State AK ZIP -

4b. If the FOFF has no street address, provide the county or township and the State in which the facility is located.

County/Township: N. STAR BOROUGH State: AK

5. Provide the latitude and longitude of the facility in degrees.

Latitude: 65d02m00s Longitude: 147d30m00s

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A. FOFF GENERAL INFORMATION

6. If the facility has any type of regulatory identification number assigned to it, provide the number and the State or Federal regulating office that issued the number.

Number

Regulating Office

F10AK0751

USACE

- 7a. If this is a formerly owned facility, to whom was the FOFF sold?

ALASCOM

- 7b. When was the FOFF sold (month/year)?

/

8. If this is a formerly operated facility, when did Federal operations cease (month/year)?

/

B. WASTE MANAGEMENT PRACTICES AT THE FOFF

1. List the hazardous waste that was disposed of at the FOFF while it was still owned or operated by a Federal agency.

Waste Name

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B. WASTE MANAGEMENT PRACTICES AT THE FOFF

2. Indicate whether the following hazardous waste management practices were used at the FOFF prior to termination of ownership or operation.

Yes No

<input type="checkbox"/>	<input checked="" type="checkbox"/>	Container Storage Area
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Tanks
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Surface Impoundments
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Waste Piles
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Incineration
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Landfill
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Land Treatment
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Underground Injection
<input type="checkbox"/>	<input type="checkbox"/>	Other <input type="text"/> (describe - e.g. open burning, open detonation, geologic repository)
<input type="checkbox"/>	<input type="checkbox"/>	Other <input type="text"/>

C. ENVIRONMENTAL CONTAMINATION AND CLEANUP

1. Was environmental monitoring conducted at the facility during Federal ownership or operation?

(If the answer is No or Do Not Know, check the appropriate box and skip to Question 3. If Yes, check Yes and proceed to Question 2.)

Yes ☐ No ☐ Do Not Know ☒

2. If Yes, what type of environmental monitoring was conducted?

☐ Air ☐ Soil ☐ Surface Water ☐ Ground Water
☐ Subsurface Gas ☐ Other
(describe)

3. Have there been any releases of hazardous wastes to the environment at the facility?

(If the answer is No or Do Not Know, check the appropriate box and skip to Section D. If Yes, check Yes and answer the remaining Question in this Section.)

Yes ☐ No ☐ Do Not Know ☒

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C. ENVIRONMENTAL CONTAMINATION AND CLEANUP

4. If Yes, indicate the media into which release(s) occurred.

(More than one media may be checked.)

- ☐ Air ☐ Soil ☐ Surface Water ☐ Ground Water
☐ Subsurface Gas ☐ Other
(describe)

5. If there was a release to the environment,

a. Were any of the releases addressed under RCRA authority?

Yes ☐ No ☐ Do Not Know ☒

b. Were any of the releases addressed under CERCLA authority?

Yes ☐ No ☐ Do Not Know ☒

c. Were any of the releases addressed under authorities other than RCRA or CERCLA (i.e. voluntary actions)?

Yes ☐ No ☐ Do Not Know ☒

6. If authority other than RCRA or CERCLA were used to address the release(s), what was the authority?

- ☐ State Authority
☐ Voluntary Cleanup
☐ Other EPA Authorities (e.g., Clean Air Act, Clean Water Act)
☐ Other
(e.g., IRP, DOE Cleanup) (describe)

7. If any of the releases were addressed under CERCLA authority, list the site name and corresponding National Priorities List (NPL) listing status, if available.

<u>Site Name</u>	<u>NPL Listing Status</u>		
	Proposed	Listed	Not Known
<input style="width: 600px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 600px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 600px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 600px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 600px; height: 20px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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D. FOFF PROGRAMS

1. Do you have a program at your agency that addresses FOFFs?

☐

Yes

☐

No

2. If you answered "yes" in Question 5, please describe the FOFF program.